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Sir:

Transmitted herewith for filing is the continuation-in-part patent application of Serial No. 09/256,948, filed February 24, 1999

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I hereby certify that this paper is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: ASSISTANT COMMISSIONER FOR PATENTS, Washington, D.C. 20231, on this date.

**For: AROMATIC SULFONE HYDROXAMIC ACID  
METALLOPROTEASE INHIBITOR**

5-14-99 Ronald Hanks  
Date Ron Hanks  
Express Mail Label No.

EL215074402US

**Enclosed are:**

- (X) 996 pages of specification, including 146 claims and an abstract.
- ( ) executed oath or declarations, with power of attorney.
- (X) an unexecuted oath or declaration, with power of attorney.
- ( ) \_\_\_\_\_ sheet(s) of informal drawing(s).
- ( ) \_\_\_\_\_ sheet(s) of formal drawings(s).
- ( ) Assignment of the invention to \_\_\_\_\_.
- ( ) Assignment Form Cover Sheet.
- ( ) A check in the amount of \$ \_\_\_\_\_ to cover the fee for recording the assignment(s) is enclosed.
- ( ) Associate power of attorney.
- 1c518 U.S. PTO  
09/311837

### Fee Calculation For Claims As Filed

a) Basic Fee						\$ 760.00
b) Independent Claims	<u>13</u>	- 3	= <u>10</u>	x \$ 78.00	= \$	<u>780.00</u>
c) Total Claims	<u>146</u>	- 20	= <u>126</u>	x \$ 18.00	= \$	<u>2,268.00</u>
d) Multiple Dependent Claims					\$260.00 = \$	<u>0.00</u>
				<b>Total Filing Fee</b>		<b>\$ 3,808.00</b>

- ( )        executed Statement of Status as Small Entity,  
reducing Filing Fee by half to \$       .00
- (X) A check in the amount of \$ 3,808.00 to cover the filing fee is enclosed.
- ( ) Charge \$                      to Deposit Account No. 23-0920.
- (X) Other This is a continuation-in-part application of Serial No. 09/256,948 filed February 24, 1999 .
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 23-0920. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 23-0920. Two duplicate copies of this sheet are enclosed.

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**By:**

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